



Office of Public Instruction
Denise Juneau, Superintendent
P.O. Box 202501
Helena, Mt 59620-2501

Montana
High School Equivalency
Program

Transcript Release Form

Please send an official transcript of my scores to the person or institution listed below:

Please provide a stamped envelope with the address of the agency or person and where the transcript should be sent.

Please provide the following information (*please print*):

Name under which you tested	City where tested / Year tested
Name now (provide if different from above)	Date of Birth / Social Security#
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Mail this transcript release form to:
High School Equivalency Program
Office of Public Instruction
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Helena, MT 59620-2501
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